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S.D. SEC. OF STATE

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER: Springfield Times		2. DATE: 9/20/17
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE $: 40-45-55
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): PO Box 465, Springfield, Bon Homme, SD 57062		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): 630 1st Street - PO Box 388 Scotland, Bon Homme, SD 57059-		
6. FULL NAME OF PUBLISHER: Rebecca Tycz		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.		
FULL NAME: B & H Publishing Inc	COMPLETE MAILING ADDRESS: PO Box 388, Scotland, SD 57059	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	515	515
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	135	135
2. Mail Subscription (Paid and or requested)	284	282
3. Paid Electronic Copies	5	5
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	424	422
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	5	5
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	2	2
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	431	429
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	76	61
2. Return from News Agents	8	25
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	515	515

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Rebecca Tycz (Signature)

Publisher (Title)

State of South Dakota)
§
County of Bon Homme)

Sworn to before me this 20th day of Sept, 2017

Peggy Schelske
Notary Public

My commission expires: 10-24-2021

(Seal)
PEGGY SCHELSKE
Notary Public
SEAL
South Dakota

Form: SOS REC 054-9/201